

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

APPLICANTS

FILING DATE

SERIAL NO. 10/019996

CLAIMS

AS FILED	IND.	DER.	AFTER 1st AMENDMENT	IND.	DER.	AFTER 2nd AMENDMENT	IND.	DER.
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* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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